

D. H. GRIFFIN WRECKING CO., Inc.

"If It's Wrecking - Call Us"

4700 HILLTOP ROAD (27407)
PHONE: (910) 855-7030
FAX: (910) 855-9309

P.O. BOX 7657
GREENSBORO, N.C. 27417-0657

August 7, 1996

COPY SENT VIA FAX (910) 771-4632

Ms. Sherri Knight
NCDEHNR
585 Waughtown Street
Winston-Salem, NC 27101-2241

RE: Napa Auto Parts, 3827 High Point Rd., Greensboro, NC
Tank Closure Report

Dear Ms. Knight:

Attached please find a copy of the completed form GW/UST-2. A copy of the closure report dated July 11, 1996 and original UST/GW-2 has been forwarded to Sharon Cihak for her review. The closure report and appropriate forms were submitted directly to me instead of Guilford County. It was my misunderstanding that they had already been forwarded a copy that has caused this delay in your receipt of the report. My apologies for the confusion. I can be reached at 910-855-7030 if you have any questions regarding this matter.

Sincerely,

D. H. GRIFFIN WRECKING CO., INC.



Evelyn L. Walker

Safety and Environmental Engineer

cc: Sharon Cihak - Guilford County Environmental Health

FOR
TANKS
IN
NC

Return Completed Form To:

The appropriate DEM Regional Office according to the county of the facility's location.
[SEE MAP ON REVERSE SIDE OF OWNER'S COPY (PINK) FOR REGIONAL
OFFICE ADDRESS].

State Use Only

I.D. Number _____

Date Received _____

INSTRUCTIONS

Complete and return within (30) days following completion of site investigation.

I. Ownership of Tank(s)

Owner Name: D.H. Griffin Wrecking Company

Corporation, Individual, Public Agency, or Other Entity

Street Address: 4700 Hill Top RoadCounty: GuilfordCity: Greensboro State: NC Zip Code: 27407Telephone Number: (910) 855-7030

(Area Code)

II. Location of Tank(s)

Facility Name: Napa Auto Parts

(or Company)

Facility ID # (if available): _____

Street Address: 3827 High Point Road

(or State Road)

County: Guilford City: Greensboro Zip Code: _____Telephone Number: (910) 294-6060

(Area Code)

III. Contact Person

Name: David Tedder

Job Title: _____

Tel. No.: (910) 434-7750

Closure Contractor: A&D EnvironmentalAddress: High Point, NC

Tel. No.: (910) 434-7750

Primary Consultant: Engineering TechnicsAddress: Winston-Salem, NC

Tel. No.: (910) 724-6994

Lab: Water Technology & ControlsAddress: Reidsville, NC

Tel. No.: (910) 342-4748

IV. U.S.T. Information

V. Excavation Condition

VI. Additional Information Required

Tank No.	Size in Gallons	Tank Dimensions	Last Contents	Water in Excavation		Free Product		Notable Odor or Visible Soil Contamination	
				Yes	No	Yes	No	Yes	No
T-1	1000	12x3.5	Gasoline		X		X		X
T-2	450	5x3.5	Diesel		X		X		X

See reverse side of pink copy (owner's copy) for additional information required by N.C. - DEM in the written report and sketch.

NOTE: The site assessment portion of the tank closure must be conducted under the supervision of a Professional Engineer or Licensed Geologist.

VII. Check List (Check the activities completed)

PERMANENT CLOSURE (For Removing or Abandoning-in-place)

- ☒ Contact local fire marshal.
☒ Notify DEM Regional Office before abandonment.
☒ Drain & flush piping into tank.
☒ Remove all product and residuals from tank.
☒ Excavate down to tank.
☒ Clean and inspect tank.
☒ Remove drop tube, fill pipe, gauge pipe, vapor recovery tank connections, submersible pumps and other tank fixtures.
☒ Cap or plug all lines except the vent and fill lines.
☒ Purge tank of all product & flammable vapors.
☒ Cut one or more large holes in the tanks.
☒ Backfill the area.

Date Tank(s) Permanently closed: 5/30/96

Date of Change-in-Service: _____

ABANDONMENT IN PLACE

- ☐ Fill tank until material overflows tank opening.
☐ Plug or cap all openings.
☐ Disconnect and cap or remove vent line.
☐ Solid inert material used - specify: _____

REMOVAL

- ☒ Create vent hole.
☒ Label tank.
☒ Dispose of tank in approved manner.
 Final tank destination: _____

VIII. Certification (Read and Sign)

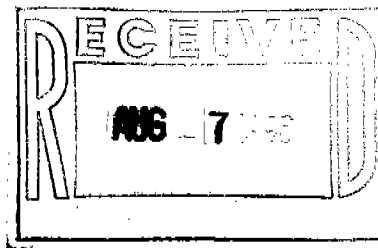
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Print name and official title of owner or owner's authorized representative

Signature

Date Signed

EVELYN L. WALKER -SAFETY & ENVIRON.
ENGINEER8-6-96



**Underground Storage Tank Closure Report
D.H. Griffin Wrecking Co.
A&D Environmental and Industrial Services, Inc.
Napa Auto Parts site
Greensboro, North Carolina
Project No.: 96-319**

Prepared by:

**ENGINEERING TECTONICS, P.A.
Winston-Salem, North Carolina**

June 30, 1996

UNDERGROUND STORAGE TANK CLOSURE REPORT

The closure report should contain, at a minimum, the following information. Any other information that is pertinent to the site should be included.

I. General Information

A. Ownership of UST(s)

1. Name of UST owner:

D. H. Griffin Wrecking company

2. Owner address and telephone number:

4700 Hill Top Road
Greensboro, North Carolina 27407
(910) 855-7030

B. Facility Information

1. Facility name: Napa Auto Parts

2. Facility ID #: NA

3. Facility address, telephone number and county:

3827 High Point Road
Greensboro, North Carolina 27407
Guilford County

C. Contacts

1. Name, address, telephone number and job title of primary contact person:

Mr. David Tedder - (910) 434-7750
A&D Environmental and Industrial Services, Inc.
Post Office Box 484
High Point, North Carolina 27261

2. Name, address and telephone number of closure contractor:

A&D Environmental and Industrial Services, Inc. - (910) 434-7750
Post Office Box 484
High Point, North Carolina 27261

3. Name, address and telephone number of primary consultant:

Engineering Tectonics - (910) 724-6994
1720 Vargrave Street
Winston-Salem, North Carolina 27107

4. Name, address, telephone number, and State certification number of laboratory:

Water Technology and Controls, Inc. (910) 342-4748
642 Tamco Road, Reidsville, North Carolina 27320
State Certification Number: 165

D. UST Information

Tank no.	Installation Dates	Size in Gallons	Tank Dimensions (feet)	Last Contents	Previous Contents (if any)
T-1	Unknown	1000	12.0 x 3.5	Gasoline	Not applicable
T-2	Unknown	450	5.0 x 3.5	Diesel	Not applicable

E. Site Characteristics

1. Describe any past releases at this site: Not Applicable

2. Is the facility active or inactive at this time? If the facility is inactive note the last time the USTs were in operation:

The facility is active at this time. The facility is currently operating as a Napa Auto Parts Store.

3. Describe surrounding property use (for example, residential, commercial, farming, etc.)

The surrounding property is primarily commercial and residential.

4. Describe site geology/hydrogeology:

The site is located in the Carolina Slate Belt formation which contains metamorphosed granitic rock, megacrystic and well foliated and locally contains hornblende.

II. Closure Procedures

A. Describe preparations for closure including the steps taken to notify authorities, permits obtained and the steps taken to clean and purge the tanks:

The Winston-Salem Regional Office of the North Carolina Department of Environment, Health and Natural Resources was notified of the intent to close by removal one (1) 1,000 gallon gasoline UST and one (1) 1,000 gallon diesel UST at the Greensboro, North Carolina facility of D.H. Griffin Wrecking Company (see Figure 1). A GW/UST-3, Notice of Intent : UST Permanent Closure or Change-In-Service, form is included as Appendix A. The Greensboro fire department was notified and a permit to remove the UST's was obtained prior to the removal. The UST's were uncovered using a backhoe. After uncovering the UST's, it was found that the diesel UST was actually 450 gallons instead of 1000 gallons. The UST's were purged of oxygen using dry ice. Once removed, the UST's were inspected by Engineering Tectonics personnel. The inspection found some slight pitting, but no obvious holes were found. The UST's were disposed of by A&D Environmental and Industrial Services, Inc. at the A&D disposal facility in High Point, North Carolina (see Appendix C). A GW/UST-2, Site Investigation Report for the Permanent Closure or Change-in-Service of UST, form is included as Appendix B.

B. Note the amount of residual material pumped from the tank(s):

No residual material was found remaining in the UST's.

C. Describe the storage, sampling and disposal of the residual material:

Not applicable

D. Excavation

Note: Refer to the "Groundwater Section Guidelines for the Investigation and Remediation of Soils and Groundwater" on limiting excavations. The Trust Fund will not pay for excessive excavation unless it is justified and verified by laboratory results.

1. Describe excavation procedures noting the condition of the soils and the dimensions of the excavation in relation to the tanks, piping and/or pumps:

Engineering Tectonics personnel were on-site for the UST removals, and noted that the UST's contained no obvious holes. The soils were noted to be a tan-brown, slightly sandy silt. The soils below the 450 and 1000 gallon UST's did not appear stained and no obvious petroleum odors were noted.

The final pit dimensions for the UST excavation were 32.0 ft. x 12.0 ft. x 7.0 ft. in depth (see Figure 2).

The pump and product lines were located above the UST's and were removed prior to the UST removals.

2. Note the depth of tank burial(s) (from land surface to top of tank):

The UST's were buried approximately 3.0 ft. from the land surface.

3. Quantity of soil removed:

The excavated soils were temporarily stock-piled on site and used during backfilling.

4. Describe soil type(s):

The soil was described as a tan-brown, slightly sandy silt.

5. Type and source of backfill used:

The backfill consisted of on-site soil that had previously been excavated, and some imported soil supplied by A&D.

E. Contaminated Soil

Note: Suspected contaminated soil should be segregated from soil that appears to be uncontaminated and should be treated as contaminated until proven otherwise. It should not be used as backfill.

1. Describe how it was determined to what extent to excavate the soil:

Based on organic vapor analyzer (OVA) screenings, soils did not appear to have been impacted by any petroleum hydrocarbons, and therefore no contaminated soil excavation was performed.

2. Describe method of temporary storage, sampling and treatment/disposal of soil:

Soils were temporarily stockpiled on site and used in backfilling the excavation.

III. Site investigation

A. Provide information on field screening and observations, include methods used to calibrate field screening instrument(s):

Soils were screened during the excavation using an organic vapor analyzer (OVA), which was calibrated in the field using clean air to zero.

B. Describe soil sampling points and sampling procedures used, including:

Note: Refer to the "Groundwater Section Guidelines for the Investigation and Remediation of Soils and Groundwater" for information about sampling requirements.

- Location of samples

Soil samples were collected as per the NCDEHNR UST closure guidelines. Two soil samples (SS-1 and SS-2) were collected from beneath UST-1, and one soil sample (SS-3) was collected from beneath UST-2 (see Figure 2).

- Sample collection procedures (grab, split spoon, hand auger, etc.)

Samples were collected using the grab method, from the backhoe bucket.

- Depth of soil samples (below land surface)

The soil samples from the UST closures were collected at a depth of 9.0 ft. below the land surface.

- Whether samples were taken from side or floor of an excavation

Soil samples were collected from the floor of the excavation.

- Sample identification

- Sample analyses

The soil samples collected were analyzed for total petroleum hydrocarbons (TPH) using EPA Method 3550 and for total petroleum fuel hydrocarbons (TPFH) using EPA Method 5030.

C. Describe groundwater or surface water sampling procedures used, including:

Groundwater was not encountered during UST closure.

Note: Refer to the "Groundwater Section Guidelines for the Investigation and Remediation of Soils and Groundwater" for information about sampling requirements.

- Location of samples

Not Applicable

- Sample collection procedures (grab, bailer, etc.)

Not Applicable

- Sample identification

Not Applicable

- Sample analyses

Not Applicable

D. Quality control measures

- Describe sample handling procedures including sample preservation and transportation

Soil samples were collected using new disposable latex gloves for each sample handling. Laboratory provided glassware was used for sample collection. The samples were placed in a chilled cooler to maintain a temperature of approximately 4° C. The samples were then transported using EPA approved chain-of-custody procedures to the laboratory. Copies of the chain-of-custody are included as Appendix E.

- Describe decontamination procedures used

Only new, disposable gloves and new laboratory provided glassware were used during the sampling event.

- Describe time and date samples were collected and date submitted to lab

The samples for the UST removal were collected on May 30, 1996 at approximately 12:00 noon and were submitted to Water Technology & Controls, Inc. on the same date.

- Describe samples collected for quality control purposes (e.g. duplicates, field blanks, trip blanks, etc.) Include methods used to obtain these samples and analytical parameters.

Not Applicable

- Discuss how results of quality control samples may have affected your interpretation of soil, groundwater or surface water sample results

Not Applicable

E. Investigation results

Soil Sample Analytical Results

UST Closure Results

Sample ID	Date Collected	Sample Depth (feet)	OVA Reading (ppm)	TPH 3550 (ppm)	TPH 5030 (ppm)
SS-1	5/30/96	9.0	0	NA	<10
SS-2	5/30/96	9.0	0	NA	<10
SS-3	5/30/96	9.0	0	<10	<10

** Copies of the laboratory analytical results are included as Appendix F.*

NA - Not Analyzed

- Describe results of Site Sensitivity Evaluation (SSE), (if SSE was not conducted, explain why not)

A Site Sensitivity Evaluation (SSE) was not conducted at the time of the UST removal, based on field observations.

- Describe methods of analyses used (include U.S. EPA method number)

Not Applicable.

- Describe analytical results for samples; discuss in relation to site specific cleanup level or action level, as appropriate
Not Applicable.

IV. Conclusions and Recommendations

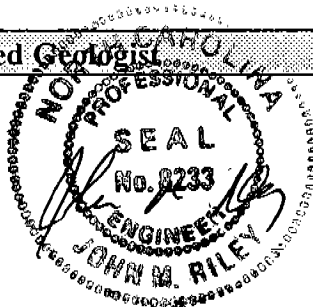
Include probable sources of contamination, further investigation or remediation tasks, or whether no further action is required.

Based on the field observations and the laboratory analytical results, it appears that there has not been any release from the former 450 gallon diesel or 1000 gallon gasoline UST's.

V. Signature of Professional Engineer or Licensed Geologist

☒ Professional Engineer Registration #:

☐ Licensed Geologist License #:



VI. Enclosures

A. Figures

1. Area Map(s) (can be USGS Topographic Quadrangle) showing:
 - Adjacent streets, roads, highways with names and numbers
 - Buildings
 - Known distance to public water supply well(s)
 - Distance to known private water supply well(s)
 - Surface water bodies
 - Groundwater flow direction (if available)
 - North arrow
 - Scale
2. Site map of UST excavation area drawn to scale, showing:
 - Buildings
 - Underground utilities such as sewer lines and other conduits
 - Orientation of UST(s), pumps, and product lines
 - Length, diameter and volume of USTs
 - Type of material(s) stored in USTs (currently and previously)
 - Sample locations (identified by letter or number)
 - Final limits of excavation
 - North arrow
 - Scale
3. Maps depicting analytical results, to include:
 - Orientation of UST(s), pumps, and product lines
 - Sample locations, depths, and identifications
 - Analytical results
 - Final limits of excavation(s)

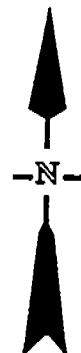
B. Tables

1. Field screening results
2. Sample identifications, depths and analyses
3. Sample identifications with results and dates that samples were taken

C. Appendices

- Appendix A Notice of Intent : UST Permanent Closure or Change-In-Service form (GW/UST-3)
- Appendix B: Site Investigation Report for Permanent Closure or Change-in-Service of UST (GW/UST-2)
- Appendix C: Certificate of tank disposal
- Appendix D: Soil, water, sludge disposal manifests
- Appendix E: Complete chain-of-custody records
- Appendix F: Copy of all laboratory analytical records

FIGURES



ENGINEERING TECTONICS, P.A.
Winston-Salem, N.C (910)
724-6994

Napa Auto Parts

96-319

Site Location Map

Feet

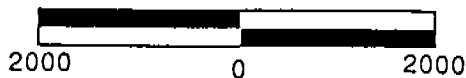
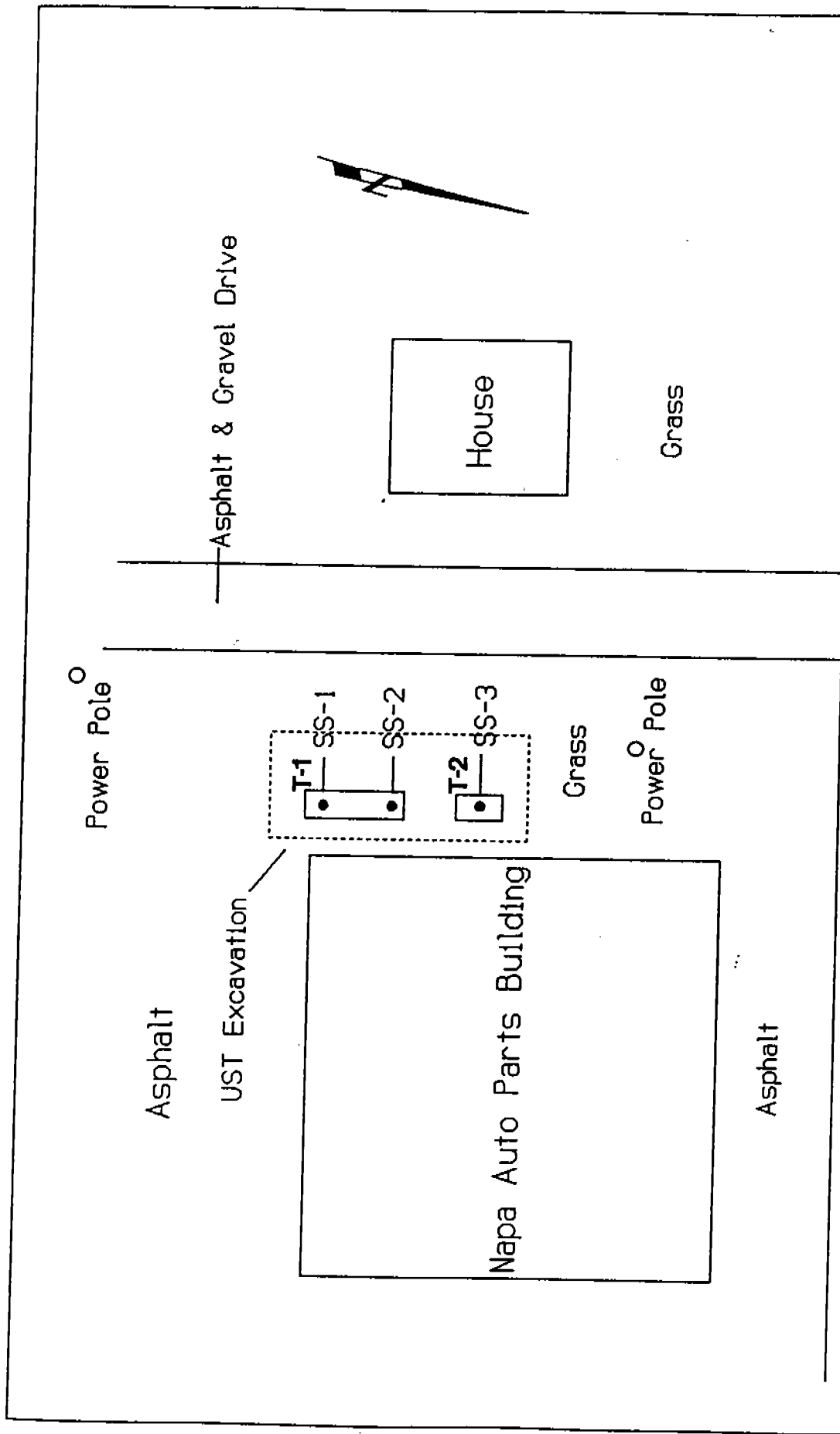



Figure 1



High Point Road

		Title: Site Plan	
Project: Napa Auto Parts			
Location: Greensboro, NC		Drawn by: SS	
Proj. #: 96-319		Approved by: TG	
DATE: 6/96		Scale: 1"=20'	
ENGINEERING TECTONICS, P.A. <small>GEOTECHNICAL / ENVIRONMENTAL ENGINEERS & SCIENTISTS P. O. BOX 1, WASHINGTON-HALL, NC 27160</small>			
		Figure: 2	

APPENDIX A
GW/UST-3 FORM

(GW/UST-3)

Notice of Intent: UST Permanent Closure or Change-In-Service

FOR
TANKS
IN
NC

Return Completed Form To:

The appropriate DEM Regional Office according to the county of the facility's location. [SEE REVERSE SIDE OF OWNER'S COPY (PINK) FOR REGIONAL OFFICE ADDRESS].

State Use Only

I. D. Number _____

Date Received _____

INSTRUCTIONS

Complete and return thirty (30) days prior to closure or change-in-service.

I. OWNERSHIP OF TANK(S)

Tank Owner Name: D.H. Griffin Wrecking Co.

(Corporation, Individual, Public Agency, or Other Entity)

Street Address: 4700 Hill Top RoadCounty: GuilfordCity: Greensboro State: NC Zip Code: 27407Tele. No. (Area Code): (910) 255-7030

II. LOCATION OF TANK(S)

Facility Name or Company Napa Auto Parts

Facility ID # (if available) _____

Street Address or State Road: 3827 High Point Rd.County: Guilford City: Greensboro Zip Code: 27407Tele. No. (Area Code): (910) 294-6060

III. CONTACT PERSON

Name: David Tedder

Job Title: _____

Telephone Number: (910) 434-7750

IV. TANK REMOVAL, CLOSURE IN PLACE, CHANGE-IN-SERVICE

1. Contact Local Fire Marshall.
2. Plan the entire closure event.
3. Conduct Site Soil Assessments.
4. If Removing Tanks or Closing in Place refer to API Publications. 2015 "Cleaning Petroleum Storage Tanks" & 1604 "Removal & Disposal of Used Underground Petroleum Storage Tanks".

5. Provide a sketch locating piping, tanks and soil sampling locations.
6. Fill out form GW/UST-2 "Site Investigation Report for Permanent Closure" and return within 30 days following the site investigation.
7. Keep records for 3 years.

V. WORK TO BE PERFORMED BY:

(Contractor) Name: A&D Environmental & Industrial ServicesAddress: P.O. Box 484 High PointState: North CarolinaZip Code: 27261Contact: David TedderPhone: (910) 434-7750

VI. TANK(S) SCHEDULED FOR CLOSURE OR CHANGE-IN-SERVICE

TANK ID#	TANK CAPACITY	LAST CONTENTS	PROPOSED ACTIVITY		
			CLOSURE	CHANGE-IN-SERVICE	
			Removal	Abandonment in Place	New Construction
<u>S T-1</u>	<u>1000 gal</u>	<u>Gasoline</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>T-2</u>	<u>1000 gal</u>	<u>Diesel</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

VII. OWNER OR OWNER'S AUTHORIZED REPRESENTATIVE

Print name and official title

J. Thomas Dade, Jr.GeologistScheduled Removal Date: 5/10/05

Signature: _____

Date Submitted: 5/10/05

*If scheduled removal is required, the owner must submit a copy of this form to the appropriate DEM Regional Office for review and approval.

APPENDIX B
GW/UST-2 FORM

FOR
TANKS
IN
NC

Return Completed Form To:
The appropriate DEM Regional Office according to the county of the facility's location.
[SEE MAP ON REVERSE SIDE OF OWNER'S COPY (PINK) FOR REGIONAL
OFFICE ADDRESS].

State Use Only
I.D. Number _____
Date Received _____

INSTRUCTIONS

Complete and return within (30) days following completion of site investigation.

I. Ownership of Tank(s)

Owner Name: D.H. Griffin Wrecking Company
Corporation, Individual, Public Agency, or Other Entity
Street Address: 4700 Hill Top Road
County: Guilford
City: Greensboro State: NC Zip Code: 27407
Telephone Number: (910) 855-7030
(Area Code)

II. Location of Tank(s)

Facility Name: Napa Auto Parts
(or Company)
Facility ID # (if available): _____
Street Address: 3827 High Point Road
(or State Road)
County: Guilford City: Greensboro Zip Code: _____
Telephone Number: (910) 294-6060
(Area Code)

III. Contact Person

Name: David Tedder Job Title: _____ Tel. No.: (910) 434-7750
Insurance Contractor: A&D Environmental Address: High Point, NC Tel. No.: (910) 434-7750
Primary Consultant: Engineering Technics Address: Winston-Salem, NC Tel. No.: (910) 724-6994
Secondary Consultant: Water Technology & Controls Address: Reidsville, NC Tel. No.: (910) 342-4748

IV. U.S.T. Information

V. Excavation Condition

VI. Additional Information Required

Tank No.	Size in Gallons	Tank Dimensions	Last Contents	Water in Excavation		Free Product		Notable Odor or Viable Soil Contamination	
				Yes	No	Yes	No	Yes	No
1	1000	12x3.5	Gasoline		X		X		X
2	450	5x3.5	Diesel		X		X		X

See reverse side of pink copy (owner's copy) for additional information required by N.C. - DEM in the written report and sketch.

NOTE: The site assessment portion of the tank closure must be conducted under the supervision of a Professional Engineer or Licensed Geologist.

VII. Check List (Check the activities completed)

PERMANENT CLOSURE (For Removing or Abandoning-in-place)

- ☒ Contact local fire marshal.
☒ Notify DEM Regional Office before abandonment.
☒ Drain & flush piping into tank.
☒ Remove all product and residuals from tank.
☒ Excavate down to tank.
☒ Clean and inspect tank.
☒ Remove drop tube, fill pipe, gauge pipe, vapor recovery tank connections, submersible pumps and other tank fixtures.
☒ Cap or plug all lines except the vent and fill lines.
☒ Purge tank of all product & flammable vapors.
☒ Cut one or more large holes in the tanks.
☒ Backfill the area.
Date Tank(s) Permanently closed: 5/30/96
Date of Change-in-Service: _____

ABANDONMENT IN PLACE

- ☐ Fill tank until material overflows tank opening.
☐ Plug or cap all openings.
☐ Disconnect and cap or remove vent line.
☐ Solid inert material used - specify: _____

REMOVAL

- ☒ Create vent hole.
☒ Label tank.
☒ Dispose of tank in approved manner.
Final tank destination: _____

VIII. Certification (Read and Sign)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Name and official title of owner or owner's authorized representative

Signature

Date Signed

APPENDIX C

CERTIFICATE OF TANK DISPOSAL



Environmental and Industrial Services

P.O. Box • High Point, NC 27261 • Phone (910) 434-7750 • FAX (910) 434-7752

TANK DISPOSAL MANIFEST

JOB# A-096594

1) Tank Owner/Authorized Representative: Name and Mailing Address _____

D.H. GRIFFIN WRECKING
4736 HILLTOP RD GREENSBORO, NC 27407

2) Tank Owner/Authorized Representative: Contact EVERYNA WALKER
Phone#: _____

3) Description Of Tanks:

<u>Tank No.</u>	<u>Capacity</u>	<u>Previous Contents</u>	<u>Comments</u>
<u>#1</u>	<u>1000 GAL</u>	<u>GASOLINE</u>	
<u>#2</u>	<u>550</u> <u>1000 GAL</u>	<u>DIESEL</u>	

4) Tank Owner/Authorized Representative Certification: The undersigned certifies that the above listed storage tanks have been removed from the premises of the tank owner.

J. Thomas Dade, Jr.
Printed/Typed Name

J. Thomas Dade, Jr.
Signature

5/30/96
Month/Day/Year

5) Transporter: The undersigned certifies that the above listed storage tanks have been transported to A&D Environmental and Industrial Services, 2718 Uwharrie Road, Archdale, N.C. 27263.

WILLIAM S. STERN
Printed/Typed Name

William S. Stern
Signature

5/30/96
Month/Day/Year

6) Disposal Certification: The undersigned certifies that the above-named storage tank(s) have been cut into scrap pieces and accepted by the metal recycling facility.

Recycling Facility:

D. H. Griffin Wrecking Co.

Lori Kidd
Printed/Typed Name

Lori Kidd
Signature

6-3-96
Month/Day/Year

APPENDIX D

**SOIL, WATER, SLUDGE
DISPOSAL MANIFESTS**

MATERIAL MANIFEST

A & D Environmental and Industrial Services, Inc.

EMERGENCY PHONE NO.
(800) 434-7750

POST OFFICE BOX 484 TEL (910) 434-7750
HIGH POINT, NC 27261 FAX (910) 434-7752

Manifest Document No.

001

Page

of

A & D Job No.

96596

GENERATOR INFORMATION

Name **D.H. Griffen**
NAPA AUTO PARTS

US EPA ID No.

Street Address
3827 HIGH POINT RD
GREENSBORO, NC

Mailing Address
4700 Hill Top Rd
GREENSBORO

Phone No.

294-6060

Contact

EVERETT WALKER

DESCRIPTION OF MATERIALS

	HM	USDOT Proper Shipping Name (Complete All Items for Hazardous Materials)	Hazard Class or Div.	UN / NA ID No.	Packing Group	Containers		Total Quantity	Unit Wt. Vol.
						Qty.	Type		
a.		#2 Fuel Oil	3	1993	III	1	TT	97	Gals
b.									
c.									

ADDITIONAL INFORMATION

	ERG No.	A & D Profile Code	Facility Use
a.			
b.			
c.			

GENERATOR'S CERTIFICATION

This is to certify that the above-described materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation. I further certify that none of the materials described above are a hazardous waste as defined by EPA 40 CFR Part 261 or any applicable state law, and unless specifically identified above, the materials contain less than 1,000 ppm total halogens and do not contain quantifiable levels (2 ppm) of PCBs as defined by EPA 40 CFR Parts 279 and 761.

Printed / Typed Name

J. Thomas Dade, Jr. for DH Griffen

Signature

J. Thomas Dade, Jr.

Mo. / Day / Yr.

5/30/96

TRANSPORTER INFORMATION

Transporter

A&D Environmental

Address

2718 Uwharrie Rd

Archdale, NC 27263

Transporter or

EPA ID No.

Unit No.

VT-3

Phone (910) 434-7750

I hereby acknowledge receipt of the above-described materials for transport from the generator site listed above.

Signature

Tom Dade

5-30-96

Shipment Date

I hereby acknowledge that the above-described materials were received from the generator site and were transported to the facility listed below.

Signature

Delivery Date

FACILITY INFORMATION

Facility

A&D Environmental

Address

2718 Uwharrie Rd.
Archdale, NC 27263

Facility or

EPA ID No.

NC 986232221

Phone

(910) 434-7750

Contact

David Tiddler

I hereby acknowledge receipt of the materials covered by this manifest except for any discrepancy noted below.

Signature

Amy L. Tiddler

Receipt Date

Discrepancies / Routing Codes / Handling Methods

a.

b.

c.

ORIGINAL - Facility Retain

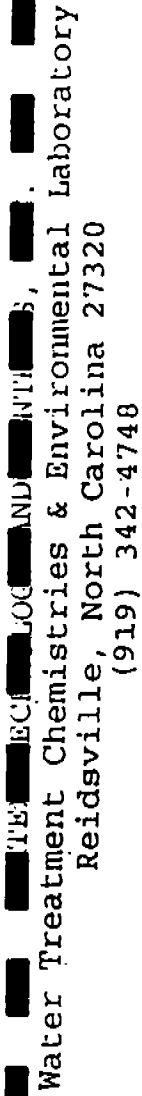
COPY 2 - Return to Generator

COPY 3 - Transporter Retain

COPY 4 - Generator Retain

APPENDIX E

CHAIN-OF-CUSTODY RECORDS

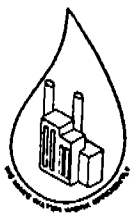


Water Treatment Chemistries & Environmental Laboratory
Reidsville, North Carolina 27320
(919) 342-4748

Customer <u>Engineering Tectonics</u>						Phone <u>(724) 6994</u>		TO BE FILLED IN ONLY AT LABORATORY	
Contact <u>T. Dade</u>									
Sampler (Signature) <u>[Signature]</u>									
Sample Location	Sample Collection			Sample Type		Number of Containers Shipped	Test(s) Required	Preservation	
	Date 1	Time	Date 2	Time	Composite			Grab	Icing O.K.?
SS-1	5/30/98	~12:00			<input checked="" type="checkbox"/>	<input type="checkbox"/>	TPH 5030	X	
SS-2	5/30/98	~12:00			<input checked="" type="checkbox"/>	<input type="checkbox"/>	TPH 5030		
SS-3	5/30/98	~12:00			<input checked="" type="checkbox"/>	<input type="checkbox"/>	TPH 5030/3550		
							*5 day turn		
Relinquished by: (Signature) <u>[Signature] ETPA</u>						Method of Shipment <u>Delivery</u>		Date & Time <u>5/30/98 12:40 PM</u>	
Received for W&C by: <u>Gaudin [Signature]</u>								Date & Time <u>5/30/98 12:45 PM</u>	
Received at lab by: <u>[Signature]</u>								Date & Time <u>5/31/98 9:00 AM</u>	

APPENDIX F

LABORATORY ANALYTICAL RESULTS



Water Technology and Controls, Inc.
Water Treatment Chemistries Environmental Laboratory
Reidsville, North Carolina 27320
(910) 342-4748

Client: Engineering Tectonics
Project: # 96-319
Client Sample ID: SS-1
Sample Collection: 05/30/96 1200

WT&C ID: 05319601
Analysis: 06/03/96
Analyst: VWV

Total Petroleum Hydrocarbons - Gasoline Fuel by CF GC/5030

Parameter

Result Units

Total Gasoline Fuel

< 10 mg/kg



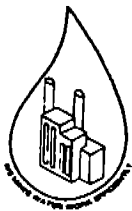
Water Technology and Controls, Inc.
Water Treatment Chemistries Environmental Laboratory
Reidsville, North Carolina 27320
(910) 342-4748

Client: Engineering Tectonics
Project: # 96-319
Client Sample ID: SS-2
Sample Collection: 05/30/96 1200

WT&C ID: 05319602
Analysis: 06/03/96
Analyst: VWV

Total Petroleum Hydrocarbons - Gasoline Fuel by CF GC/5030

<u>Parameter</u>	<u>Result</u> <u>Units</u>
Total Gasoline Fuel	< 10 mg/kg



Water Technology and Controls, Inc.
Water Treatment Chemistries Environmental Laboratory
Reidsville, North Carolina 27320
(910) 342-4748

Client: Engineering Tectonics
Project: # 96-319
Client Sample ID: SS-3
Sample Collection: 05/30/96 1200

WT&C ID: 05319603
Analysis: 06/03/96
Analyst: VWV

Total Petroleum Hydrocarbons - Diesel Fuel by CF GC/3550

<u>Parameter</u>	<u>Result</u> <u>Units</u>
Total Diesel Fuel	< 10 mg/kg

Total Petroleum Hydrocarbons - Gasoline Fuel by CF GC/5030

<u>Parameter</u>	<u>Result</u> <u>Units</u>
Total Gasoline Fuel	< 10 mg/kg